Application or Docket Number

The second secon

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

-- 1.1 PTO-875

CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL TYPE	SMALL ENTITY TYPE OF			OTHER THAN OR SMALL ENTITY				
FC)R		NUMBE	R FILED		NUMBER	EXTRA	RATE	FEE] [RATE	FEE
ВА	SIC FEE								345.00	OR		690.00
TO	TAL CLAIMS		17	minus	20=	•		X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	7	minus	s 3 =	. 4		X39=		OR	X78=	312
MU	LTIPLE DEPEN	DENT	CLAIM PI	RESENT				+130=		OR	+260=	
* if	the difference	in colu	ımn 1 is	less than z	ero, e	enter "0" in c	column 2 . ,	TOTAL		OR	TOTAL	1, , 2
	C		S AS A umn 1)	MENDE		PART II Column 2)	(Column 3)	OTHER THA SMALL ENTITY OR SMALL ENTI				
AMENDMENT A		REM Al	AIMS IAINING FTER NDMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*		Minus	**	20	=	X\$ 9=		OR	X\$18=	
AME	Independent	*	' (Minus	**		=	X39=		OR	X78=	
-	FIRST PRESE	NIAH	ON OF MI	JLTIPLE DE	PEN	DENT CLAIM		+130=		OR	+260=	
								TOTAL ADDIT, FEE		اما	TOTAL ADDIT. FEE	
			umn 1)		(0	Column 2)	(Column 3)	ADDIT. FEE	<u>-</u>		ADDIT. FEL	
ENT B		REM A	AIMS MAINING FTER NDMENT		P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDE	Total	•		Minus	••		±	X\$ 9=		OR	X\$18=	<u> </u>
AMENDM	Independent	·		Minus			=	X39=		OR	X78=	
-	FIRST PRESE	NIAII	JN OF M	ULTIPLE DE	EPENI	DENT CLAIM		+130=		OR	+260=	
								TOTAL ADDIT FEE		OR	TOTAL ADDIT FEE	
		(Col	umn 1)		((Column 2)	(Column 3)			-		
O		Cl ,	_AIMS			HIGHEST			ADDI-			ADDI-
AMEND		*		i.,	-4		1	.				: *
AM	FIRST PRESE	NTATIO	ON OF M	MAR.	ì	· DENEL AN		Χ 3 *		OR	χ 38	
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							·		. *	,		

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE OF		O.B.	OTHER THAN SMALL ENTITY			
TO	OTAL CLAIMS			*				RATE	FEE		RATE	FEE
FC	DR		NUMBER	FILED		BER EXTRA	1	BASIC FEE	355.00	OR	BASIC FEE	
TC	OTAL CHARGEA	BLE CLAIMS	ر ک mir	nus 20=	*			X\$ 9=	·	OR	X\$18=	
INDEPENDENT CLAIMS			∕ mi	nus 3 =	• -/	/		X40=	11,0	OR	X80=	
М	JLTIPLE DEPEN	DENT CLAIM PI	RESENT]	+135=	<i>/ La ·-</i>	OR	+270=	
* If	the difference	in column 1 is	less than ze	ero, enter	r "0" in c	column 2	İ	TOTAL	F(15)	OR	TOTAL	
	С	LAIMS AS A	MENDED								OTHER	
		(Column 1) CLAIMS	K Table	(Colur		(Column 3)	<u>)</u> ,	SMALLE		OR I	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
AM	Independent FIRST PRESE	* NTATION OF MU	Minus	PENDENT	CLAIM	=	$\left\{ \ \right\}$	X40=		OR	X80=	
					O E / IIII	<u></u>	┛╽	+135=		OR	+270=	
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	VICTOR COMPRESSION AND ACTION	(Column 1) CLAIMS	AND SECTIONS	(Colur		(Column 3)	_					
MENT B		REMAINING AFTER AMENDMENT	<u> </u>	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Q _N	Total	*	Minus	**				X\$ 9=		OR	X\$18=	
AMEND	Independent	·	Minus	•••]	X40:		OR	X80_	
<u></u>	FIRST PRESE	NTATION OF MU	JENPLE DEP	'ENDENT	Cl AIM			+135=		OR	+270=	
							L	TOTAL ADDIT FEE			TOTAL ADDIT FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)		100H FEE			ADDIT FEE	
O	17.5	CLAIMS REMAINING		HlGH •;•••	EST	ממר ני <u>י</u> י	7 [ADDI-	ļ		ADDI-
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			-					_			•	

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION	NUMBER:							
		Total Fee	Calcula	tion	ı			
	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101				345	690	=	
Total Claims >20	203/103	-20 =		X	9	18	=	-
Independent Claims >3	202/102	-3 =		Х	39	78	=	3/6
Mult. Dep Claim Present	204/104				130	260	=	
Surcharge	205/103				<u>65</u>	130	=	14:
English Translation	139							
TOTAL FEE CALCUL	ATION							11 %).

Total Filing Fees Due =	\$	į).	*	·	
Less Filing Fees Submitted	- \$				

Marcia Sordon
Office of Initial Patent Examination

Fees due upon filing the application: